

09/786364

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	11 minus 20 =	
INDEPENDENT CLAIMS	2 minus 3 =	

MULTIPLE DEPENDENT CLAIM PRESENT

SMALL ENTITY

OTHER THAN
TYPE OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	50	BASIC FEE	
OR		OR	
XS 9=		XS18=	
OR		OR	
X40=		X80=	
OR		OR	
+135=		+270=	
OR		OR	
TOTAL	50	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

12-21-04

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	DECREASED NUMBER IN THIS SPACE	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	6	Minus	20	0
Independent	2	Minus	3	0

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=	0	XS18=	
OR		OR	
X40=	0	X80=	
OR		OR	
+135=	0	+270=	
OR		OR	
TOTAL ADDT. FEE	0	TOTAL ADDT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	DECREASED NUMBER IN THIS SPACE	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	6	Minus	20	0
Independent	2	Minus	3	0

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS18=	
OR		OR	
X40=		X80=	
OR		OR	
+135=		+270=	
OR		OR	
TOTAL ADDT. FEE		TOTAL ADDT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	DECREASED NUMBER IN THIS SPACE	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	6	Minus	20	0
Independent	2	Minus	3	0

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		XS18=	
OR		OR	
X40=		X80=	
OR		OR	
+135=		+270=	
OR		OR	
TOTAL ADDT. FEE		TOTAL ADDT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

* If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".

* If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

* The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

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